ACLU of Utah Youth Activist
2018 Scholarship Program Application

Please submit this completed application to the Youth Activist Scholarship Program, ACLU of Utah, 355 North 300 West, Salt Lake City, UT 84103, by January 22, 2018. Please print clearly.

A. PERSONAL INFORMATION (to be completed by applicant)

First Name: _______________ M.I. ___ Last Name: _______________

Home Address: __________________________________________________________

City: _____________________ State: _________________ Zip: ______________

Phone: ________________ Cell Phone: _____________ E-mail: _________________

Date of Birth: _____________________

High School: ____________________________________________________________

Current GPA: _____ If your current GPA is less than 3.0, you may still apply but need to submit an explanation for the lower GPA.

How did you first learn about the ACLU Youth Scholarship Program?

_____________________________________________________________

Please Note: The purpose of the ACLU of Utah Foundation scholarship is to provide young civil liberties activists with financial assistance in obtaining a college degree. The scholarship is intended to pay for tuition and room/board for the recipient’s first year of college and will be sent directly to the college’s office of financial aid. In the event that the recipient should receive a full scholarship from his/her college and does not need to pay for these expenses, the scholarship can only be used for other direct educational expenses for the recipient’s first year of college, to be distributed through a school-sanctioned account (e.g., a student account in the official school bookstore). The scholarship cannot be used for specific or individual purchases such as a computer, lab fees, or items for a dorm room. No funds can be given directly to the scholarship winner into a private account, and funds cannot be sent to the university and then reimbursed as cash to the recipient.
For the applicant: I agree to the rules of the ACLU of Utah Foundation scholarship process. I affirm that the information enclosed in the application is accurate and original to me, and I authorize the American Civil Liberties Union of Utah Foundation to reproduce, distribute, create derivative works of and publicly display my essay in all media now known or hereafter developed in connection with its mission, including for promotional purposes. If I am a recipient of the 2018 ACLU Youth Scholarship, I grant the ACLU Foundation the right to use my name, likeness, and biographical information in all media in connection with ACLU Foundation's mission, including promotional materials without any further compensation or permission.

Signature: ________________________________             Date: ___________________

For applicants under 18: Consent from a Parent or Legal Guardian is also required

I, ______________________ , am the [parent/guardian] of the above named individual. I have read the foregoing and fully understand the contents hereof. I hereby consent to the foregoing on his/her behalf.

Signature: ________________________________             Date: ___________________

B. UTAH HIGH SCHOOL TRANSCRIPT

Please submit to the ACLU of Utah your most recent official transcript to demonstrate the GPA requirement.

C. ESSAY

On separate pages, please attach a personal statement of 1,000 words or less describing your civil liberties activism. Please include a combination of the following: your understanding of what it means to be a civil liberties activist, specific examples of how you have demonstrated your dedication to civil liberties, challenges that you had to overcome in doing so, how you showed leadership in your actions, and how you plan on continuing your activism in college and beyond.
D. RECOMMENDATION FORM

Please give this recommendation to the applicant, or mail to the Youth Activist Scholarship Program, ACLU of Utah, 355 North 300 West, Salt Lake City, UT 84103, by January 22, 2018.

Section I – To be completed by the applicant.

Name of applicant: _______________________________________________________

Name/Title of Reference: __________________________________________________

Section II – To be completed by applicant’s reference (not a family member).

On an attached page, please type the answers to the following questions:

1. In what capacity and how long have you known the applicant?

2. How has the applicant shown his/her commitment and activism to civil liberties? Please provide specific examples.

3. How has the applicant shown leadership and teamwork in his/her community, both through his/her activism and otherwise. Please provide specific examples.

4. How do you see the applicant continuing his/her civil liberties activism in college?

5. Additional comments (including information regarding financial need):

Name: __________________________ Title/Position______________________

School/Organization/Employer: ___________________________________________

Telephone: _______________________ E-mail: ___________________________

Signature: _________________________________ Date: _________________
E. RECOMMENDATION FORM

Please give this recommendation to the applicant, or mail to the Youth Activist Scholarship Program, ACLU of Utah, 355 North 300 West, Salt Lake City, UT 84103, by January 22, 2018.

Section I – To be completed by the applicant.

Name of applicant: _______________________________________________________

Name/Title of Reference: __________________________________________________

Section II – To be completed by applicant’s reference (not a family member).

On an attached page, please type the answers to the following questions:

6. In what capacity and how long have you known the applicant?

7. How has the applicant shown his/her commitment and activism to civil liberties? Please provide specific examples.

8. How has the applicant shown leadership and teamwork in his/her community, both through his/her activism and otherwise. Please provide specific examples.

9. How do you see the applicant continuing his/her civil liberties activism in college?

10. Additional comments (including information regarding financial need):

Name: __________________________ Title/Position______________________

School/Organization/Employer: ___________________________________________

Telephone: _______________________ E-mail: ___________________________

Signature: _________________________________  Date: _________________